PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10/043458

CLAIMS A	(Column		(Column 2)	SM TY		ENTITY	OF		R T HAN
TOTAL CLAIMS				_	RATE	FEE	PRICERY	RATE	FEE
FOR	NUMBER	FILED I	NUMBER EXTRA	-	SIC FE			BASIC FEI	
TOTAL CHARGEABLE CLAIMS	mir	nus 20= *		-	 :) OF		4100
INDEPENDENT CLAIMS	1	nus 3 = *			(\$ 9=		OP	X\$18=	<u> </u>
MULTIPLE DEPENDENT CLAIM P	<u> </u>	1143 0 - 1.		>	<42= ———	<u> </u>	OR	X84=	
				+	140=		OR	+280=	
* If the difference in column 1 is	less than ze	oro, enter "0' ·	' in column 2	TO	DTAL		OR	TOTAL	
CLAIMS AS A (Column 1)	MENDED	(Column	2) (Column 3)	· SN	/ALL	ENTITY	OR	OTHER SMALL	THAN ENTITY
CLAIMS REMAINING AFTER AMENDMENT Total Independent S Total Independent		HIGHEST NUMBER PREVIOUS PAID FOR	PRE ENT LY EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TI-DNA FEE
Total . 20	Minus	24	. =	XS	9=		OR	X\$18=	1
Independent * 3	Miņus	*** 3	1	· X	42=		OR	X84=	/
FIRST PRESENTATION OF MU	ILITE DEPI	ENDENT CL	AIM	+1	40=		1	+280=	
·	ח	CT AV	AILABLE				OR OR	TOTAL	
(Column 1)	. Bi	(Column 2		ADDI	r. FEE	L	1 0n /	ADDIT. FEE	······································
CLAIMS REMAINING AFTER AMENDMENT Total Independent		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total *	Minus	**	=	X\$	9=		OR	X\$18=	
Independent *	Minus	***	=-	X4	2=		1 1	X84=	• *
FIRST PRESENTATION OF MUL	TIPLE DEPE	NDENT CLA	IM	-			OR		-
				+14			0R	+280=	***************************************
				ADDIT.	FEE		OR A	TOTAL DDIT. FEE	
(Column 1) CLAIMS		(Column 2)	(Column 3)	-					
REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	re	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total * N	1inus	k-k	=	X\$:	9=		OR	X\$18=	
<u> </u>		***	=	X42)=		-	X84=	
FIRST PRESENTATION OF MULT	TIPLE DEPEI	NDENT CLAI	M				OR .	7.01-	
If the entry in column 1 is less than the e	entry in column	2 write "O" in	column 3	+140			OR	+280=	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE							OR AD	TOTAL DIT. FEE	
The "Highest Number Previously Paid F	or" (Total or Inc	dependent) is t	he highest number fo	ound in th	e appr	opriale box	in colum	n 1.	.

PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2001

10043458

CLAIMS AS FILED - PART (Column 1)		(Column 2)		_	SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS		24				Γ	RATE	FEE		RATE	FEE	
FOR				NUMBI	BER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS 24_		24_mir	nus 20=	20= * 🗸			X\$ 9=	36	OR	X\$18=		
INDEPENDENT CLAIMS 3- minus 3 =			nus 3 =	*			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT						+140=		OR	+280=			
* If the difference in column 1 is less than zero, enter			r "0" in c	olumn 2	L	TOTAL	406	OR	TOTAL			
CLAIMS AS AMENDED			- PAR	RT II			<u> </u>			OTHER THAN		
(Column 1)					mn 2)	(Column 3)		SMALL	NTITY	OR	SMALL	NTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL AIM	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+140=		OR	+280=		
AVAILADIE							ADDI FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) BEST AVAILABLE GOOD FEE OR ADDIT. FEE (Column 3)											
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MOZ	Total	*	Minus	**		=		X\$ 9=	v	OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=	4	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			umn 2)	(Column 3	100					•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=		X\$ 9=	-	OR	X\$18=	
AME	Independent	*	Minus	***	IT OLAIN	=	4	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	IULTIPLE DI	=PENDER	VI CLAIN		_	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in a ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than					ite "0" in co	olumn 3. an 20. enter "2	o."	TOTAL		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20. ***If the "Highest Number Previously Paid For" IN THIS SPACE is I so than 3, ent r "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												